

STATE OF NEVADA
DIVISION OF WATER RESOURCES
WELL DRILLER'S REPORT

OFFICE USE ONLY
 Log No. 122749
 Permit No. _____
 Basin 088

PRINT OR TYPE ONLY

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

NOTICE OF INTENT NO. 73063

1. OWNER **John Royce/ LCR Trust** ADDRESS AT WELL LOCATION **Same**
 MAILING ADDRESS **5405 Mountain Meadow Reno, NV 89511**
 Subdivision Name: _____ County: **Washoe**

2. LOCATION **SW 1/4 NW 1/4 Sec 2 T 17 / R 19 E** Latitude **39.368528** UTM E NAD 27
 PERMIT/WAIVER NO. **Dom-14-21A** **045-536-18** Longitude **-119.824499** N NAD 83/WGS 84
Issued by Water Resources Parcel No.

3. WORK PERFORMED
 New Well Replace Recondition
 Deepen Other _____

4. PROPOSED USE
 Domestic Irrigation Test
 Municipal/Industrial Monitor Stock

5. WELL TYPE
 Cable Rotary RVC
 Air Other **Mud**

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Brown Purple Volcanics & Sand	X	155	161	6
Drilling Blind- Possible Clay		161	166	5
Drilling Blind- Hard Rock		166	174	8
Drilling Blind- Clays		174	186	12
Drilling Blind- Volcanics & Clay		186	206	20
Drilling Blind- Clays		206	227	21
Drilling Blind- Volcanic Rock		227	232	5
Drilling Blind- Clay		232	234	2
Drilling Blind- Volcanic Rock		234	238	4
Drilling Blind- Clay		238	270	32
Drilling Blind- Rock w/Fractures	x	270	283	13
Drilling Blind- Clays		283	300	17

Washoe County Permit Number **WL150035**

Lost Circulation at 161'. Got mud to circulate to ~12' below top of casing but never got returns back to surface.

MAD 27
39.368618°N
119.823477°W

9. WELL CONSTRUCTION

Depth Drilled **300** Feet Depth Cased **300** Feet

HOLE DIAMETER (BIT SIZE)

From _____ To _____
6 1/8 Inches **155** Feet **300** Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
5	10.79	.188	130	300

Perforations:

Type of perforation **Factory**
 Size of perforation **.090 double perf.**

From **160** feet to **180** feet
 From **240** feet to **260** feet
 From **280** feet to **300** feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Annular Seal: Yes No

Neat Cement _____ to _____ Pumped Poured
 Cement Grout _____ to _____ Pumped Poured
 Concrete Grout _____ to _____ Pumped Poured
 ≥30% Bentonite Grout _____ to _____ Pumped Poured
 Gravel Pack: Yes No _____ to _____ Pumped Poured
 Type: _____
 Bentonite Chips: Yes No _____ to _____ Pumped Poured
 Type: _____

Date started: **4/29**, 20 **15**
 Date completed: **5/1**, 20 **15**

7. Water Level

Static water level: **136** feet below land surface
 Artesian Flow: _____ G.P.M. _____ P.S.I.
 Water Temperature: **52** °F
 Quality: **not tested**

8. WELL TEST DATA

TEST METHOD:	TEST METHOD:		Time (Hours)
	G.P.M.	Draw Down (Feet Below Static)	
Air	20+	Air	4

10. DRILLER'S CERTIFICATION

This well was drilled under my supervision and the report is true to the best of my knowledge.

Name **Bruce MacKay Pump & Well Service, Inc.**
(CONTRACTOR)

Address **1600 Mt. Rose Hwy**
(CONTRACTOR)
Reno, NV 89511

Nevada contractor's license number issued by the State Contractor's Board **23096**
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller **2326**

Signed *Bruce MacKay*
 By driller performing actual drilling on site or contractor

Date **5-12-2015**

Deepens Well 109 15865